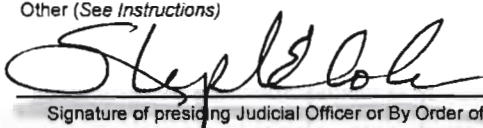

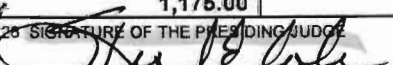
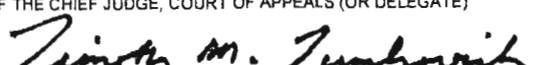


1. CIR./DIST./DIV. CODE WYX		2. PERSON REPRESENTED Jack Parrent		VOUCHER NUMBER 120313000078			
3. MAG. DKT./DEF. NUMBER 2:11-M2105-001		4. DIST. DKT./DEF. NUMBER 11MJ100		5. APPEALS DKT./DEF. NUMBER			
6. OTHER DKT. NUMBER		7. IN CASE/MATTER OF (Case Name)		8. PAYMENT CATEGORY			
9. TYPE PERSON REPRESENTED		10. REPRESENTATION TYPE					
U.S. v. Parrent		Petty Offense		Adult Defendant			
				CC Criminal case			
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) <i>If more than one offense, list (up to five) major offenses charged, according to severity of offense.</i> 36 CFR 4.23(a)(1) DUI; 36 CFR 4.23(a)(2) BAC +0.08%; 36 CFR 4.2(b) Drive w/Suspended License; Etc.							
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS: Name: Jami Rebsom Address: Jami Rebsom Law Firm, P.L.L.C. P.O. Box 670 Livingston, MT 69047 Phone #: (406) 222-5963 Fax #: 14. NAME AND ADDRESS OF LAW FIRM (Only provide per instructions) Name: Address: 			13. COURT ORDER: <div style="border: 1px solid black; padding: 5px;">Prior Attorney's Name <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this Court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in his case, OR <input type="checkbox"/> Other (See Instructions) <div style="text-align: center;"> Signature of presiding Judicial Officer or By Order of the Court 6/17/11 Date of Order Nunc Pro Tunc Date</div></div> Repayment or partial repayment ordered from the person represented for this service at time of appointment. <input type="checkbox"/> Yes <input type="checkbox"/> No				
CLAIM FOR SERVICES AND EXPENSES			FOR COURT USE ONLY				
Categories (Attach itemization of services w/ dates)		HOURS CLAIMED	TOTAL AMOUNT CLAIMED	Math/Tech. Adjusted Hrs	Math/Tech. Adjusted Amounts	Additional Review	Amount Authorized
In Court	a. Arraignment and/or Plea	0.6	75.00	-	-		75.00
	b. Bail and Detention Hearings	-	-	-	-		-
	c. Motion Hearings	0.3	37.50	-	-		37.50
	d. Trial	6.0	750.00	-	-		750.00
	e. Sentencing Hearings	1.7	212.50	-	-		212.50
	f. Revocation Hearings	-	-	-	-		-
	g. Appeals Court	-	-	-	-		-
	h. Other (Specify on add'l sheets)	0.8	100.00	-	-		100.00
TOTALS		9.4	1,175.00	-	-		1,175.00
Out of Court	a. Interviews and Conferences	11.6	1,450.00	-	-		1,450.00
	b. Obtaining and reviewing records	11.8	1,475.00	-	-		1,475.00
	c. Legal Research and brief writing	3.5	437.50	-	-		437.50
	d. Travel time	7.5	937.50	-	-		937.50
	e. Investigative & other work (Specify)	-	-	-	-		-
	TOTALS		34.4	4,300.00	-	-	
17. Travel Expenses (lodging, parking, meals, mileage, etc.)			244.80	-	-		244.80
18. Other Expenses (other than expert, transcripts, etc.)			26.59	-	-		26.59
GRAND TOTALS (CLAIMED AND ADJUSTED):			5,746.39	-	-		5,746.39
19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE From: 1/30/2011 to: 1/31/2012 6/17/11			20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION:		21. CASE DISPOSITION Convicted/Court Trial		
22. CLAIM STATUS: <input checked="" type="radio"/> Final Payment <input type="radio"/> Interim Payment Number <input type="radio"/> Supplemental Payment (Payment #)							
Have you previously applied to the court for compensation and/or reimbursement for this case? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, were you paid? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Other than from the court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, give details on additional sheets.							
I swear or affirm the truth or correctness of the above statements. Signature of Attorney  Date 2-16-12							
APPROVED FOR PAYMENT - COURT USE ONLY							
23. IN COURT COMP. 1,175.00	24. OUT OF COURT COMP. 4,300.00	25. TRAVEL EXPENSES 244.80	26. OTHER EXPENSES 26.59	27. TOTAL AMT. APPR. - Check if Certified <input checked="" type="checkbox"/> 5,746.39			
28. SIGNATURE OF THE PRESIDING JUDGE  Stephen E. Cole			29a. JUDGE CODE 89BA				
29. IN COURT COMP. \$ 1,175.00	30. OUT OF COURT COMP. \$ 4,300.00	31. TRAVEL EXPENSES \$ 244.80	32. OTHER EXPENSES \$ 26.59	33. TOTAL AMT. APPR./CERT. \$ 5,746.39			
34. SIGNATURE OF THE CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE)  Timothy M. Tymn			34a. JUDGE CODE - 023				